

**Application Serial No. 10/023,320 - Filed December 14, 2001**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**Application No.: 10/023,320**

**Filed: December 14, 2001**

**Inventor(s):**

## Scott Harris Bloom

**Title: OPTICAL AMPLIFIERS  
IN A FREE SPACE  
LASER  
COMMUNICATION  
SYSTEM**

.....

**Examiner:** David C. Payne

Group/Art Unit: 2633

Atty. Dkt. No: 5957-16300

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below.

**Rory D. Rankin**

Printed Name \_\_\_\_\_

**July 26, 2005**

**Signature**

Date \_\_\_\_\_

**RESPONSE TO OFFICE ACTION OF**  
**MARCH 9, 2005**

**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**Dear Sir:**

This paper is submitted in response to the Office Action of March 9, 2005, to further highlight why the application is in condition for allowance.

**Please amend the case as listed below.**

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9/10/2005 DSAVDY 00000001 501505 10023320  
FC:1201 200.00 DA  
FC:1202 50.00 DA

**CONCLUSION**

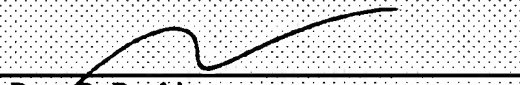
Applicants submit the application is in condition for allowance, and an early notice to that effect is requested.

If any fees are due, the Commissioner is authorized to charge said fees to Meyertons, Hood, Kivlin, Kowert, & Goetzel, P.C. Deposit Account No. 501505/5957-16300/RDR.

Also enclosed:

- ☒ Two-Month Extension of Time
- ☒ Fee Authorization
- ☒ Transmittal of Power of Attorney and Notice of Change of Address
- ☒ Formal Drawings (5 Sheets; Figures 1-6)

Respectfully submitted,

  
Rory D. Rankin  
Reg. No. 47,884  
ATTORNEY FOR APPLICANT(S)

Meyertons, Hood, Kivlin,  
Kowert, & Goetzel, P.C.  
P.O. Box 398  
Austin, TX 78767-0398  
Phone: (512) 853-8800

Date: July 26, 2005

# **PATENT APPLICATION FEE DETERMINATION RECORD** Effective October 1, 2001

Application or Docket Number

14/023320

## **CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS	23	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	23 minus 20 =	3
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## **CLAIMS AS AMENDED - PART II**

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	24	23	
Independent	5	4	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	27
X42=	42
+140=	
TOTAL	439

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	50
X84=	200
+280=	
TOTAL ADDIT. FEE	250

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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